

10/537503

**BATTELLE MEMORIAL INSTITUTE**

**DELEGATION OF AUTHORITY**

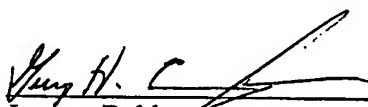
**TO MICHAEL GEGENHEIMER**

**FOR PROTECTION OF BATTELLE'S INTELLECTUAL PROPERTY**

Pursuant to authority vested in me as the Senior Vice President and Secretary, Battelle Memorial Institute pursuant to resolutions of the Board adopted at its meeting on November 11, 2004, authority is conferred upon Michael Gegenheimer, effective March 1, 2005, as follows:

1. To act on behalf of Battelle Memorial Institute in the filing and prosecution of U.S. and foreign patent applications, trademark applications, and copyright registrations, including the authority to execute powers of attorney and any other document(s) in the name of Battelle Memorial Institute as may be necessary in such filing(s) and prosecution(s).
2. To execute intellectual property licensing and sale agreements and options therefore in the name of, and on behalf of, Battelle Memorial Institute; and
3. To execute Confidential Disclosure Agreements (CDAs), Nondisclosure Agreements (NDAs), and other forms of agreements generally directed to granting, protecting, or conveying rights in the intellectual property of Battelle Memorial Institute.

This delegation shall be exercised in accordance with applicable Battelle regulations, budgets, procedures, directives, and policies taking into consideration risk management. All previous delegations of authority to you are hereby revoked. This delegation shall continue until revoked and shall automatically cease in the event that you are no longer employed by the Corporation. This delegation may not be redelegated.

  
for Jerome Bahlmann 3/17/05  
Senior Vice President and Secretary

Copy: Corporate Secretary

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PTO/SB/81 (04-05)

Approved for use through 11/30/2005 OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	Saunders, James H.
Title	Method of Removing Sulfur From a Fuel Cell
Art Unit	Electrode
Examiner Name	
Attorney Docket Number	13920US

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

24116

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

☐ Firm or Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Signature	<i>James H. Saunders</i>	Date	June 2, 2005
Name	James H. Saunders	Telephone	(814) 424-3271
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 4 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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Rec'd PCT/PTO 03 JUN 2005

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PTO/SB/81 (04-05)

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature	Caroline M. Markworth, Executor	Date	6/2/05
Name	Alan J. Markworth (deceased), Caroline M. Markworth, Executor	Telephone	(614) 783-2140
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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Title	Method of Removing Sulfur From a Fuel Cell
Art Unit	Electrode
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Attorney Docket Number	13920US

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature	<i>Bradley C. Glenn</i>	Date	5/31/05
Name	Bradley C. Glenn	Telephone	(614) 424-7742
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 4 forms are submitted.

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CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number

Filing Date

First Named Inventor

Saunders, James H.

Title

Method of Removing Sulfur From a Fuel

Art Unit

Electrode

Examiner Name

Attorney Docket Number

13920US

Cell

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I hereby appoint:

☒ Practitioners associated with the Customer Number:

24116

OR

☐ Practitioner(s) named below:

Name	Registration Number

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☐ The address associated with Customer Number:

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☐ Firm or Individual Name

Address

City

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature

Barry Hindin

Date

6-2-05

Name

Barry Hindin

Telephone

(614) 424-4121

Title and Company

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 4 forms are submitted.

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PTO/SB/01 (04-05)

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**



Declaration  
Submitted  
With Initial  
Filing

OR



Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket  
Number

13920US

First Named Inventor

Saunders, James H.

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHODS OF REMOVING SULFUR FROM A FUEL CELL ELECTRODE ✓

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

12/05/2003 ✓

as United States Application Number or PCT International

Application Number PCT/US2003/039037 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PCT/2003/039037 PCT/2003/39037	PCT	12/05/2003 ✓	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>



Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	<input checked="" type="checkbox"/> The address associated with Customer Number:	<u>24116</u>	OR	<input type="checkbox"/> Correspondence address below
Name				
Address				
City		State	ZIP	
Country	Telephone		Email	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <u>James H.</u>		Family Name or Surname <u>Saunders</u>		
Inventor's Signature <u>James H. Saunders</u>		Date <u>6/2/05</u>		
Residence: City <u>Worthington</u>	State <u>OH</u>	Country <u>US</u>	Citizenship <u>US</u>	
Mailing Address 2009 Samada Avenue				
City <u>Worthington</u>	State <u>Ohio</u>	Zip <u>43085</u>	Country <u>US</u>	
NAME OF SECOND INVENTOR: DECEASED. See Suppl. Sheet pg. 2		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <u>Alan J. (deceased)</u>		Family Name or Surname <u>Markworth</u>		
Inventor's Signature		Date		
Residence: City <u>Columbus</u>	State <u>OH</u>	Country <u>US</u>	Citizenship <u>US</u>	
Mailing Address 1679 Cambridge Boulevard				
City <u>Columbus</u>	State <u>Ohio</u>	Zip <u>43212</u>	Country <u>US</u>	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>2</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.				

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PTO/SB/2LR (04-05)

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# DECLARATION Supplemental Sheet

For Legal Representatives (35 U.S.C. 117) On Behalf of A Deceased or Incapacitated Inventor

Enter Deceased or Incapacitated Inventor's Name Alan J. Markworth (deceased)

Page 2 of 2

Name of Legal Representative:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
<u>Caroline M.</u>		<u>Markworth</u>	
Legal Representative's Signature <u>Caroline M. Markworth</u>		Date <u>6/2/05</u>	
Residence: City <u>Columbus OH</u>	State <u>Ohio</u>	Country <u>US</u>	Citizenship <u>US</u> ✓
Mailing Address <u>1694 Gardenstone Drive</u>			
Mailing Address			
City <u>Columbus</u>	State <u>Ohio</u>	Zip <u>43235</u>	Country <u>US</u>
Name of Additional Legal Representative, if any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Legal Representative's Signature			
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Legal Representative, if any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Legal Representative's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

This collection of information is required by 35 U.S.C. 117 and 37 CFR 1.42, 1.43, 1.63 and 1.64(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/02A (09-04)

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet
Page <u>1</u> of <u>2</u>	

300

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
<u>Bradley C.</u>		<u>Glenn</u>	
Inventor's Signature <u>Bradley C. Glenn</u>		Date <u>5/31/05</u>	
<u>Hilliard</u> Residence: City	<u>OH</u> State	<u>US</u> Country	<u>US</u> ✓ Citizenship
3723 Carriage Run Drive Mailing Address			
<u>Hilliard</u> City	<u>Ohio</u> State	<u>43026</u> Zip	<u>US</u> Country

400

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
<u>Barry</u>		<u>Hindin</u>	
Inventor's Signature <u>Barry Hindin</u>		Date <u>6-2-05</u>	
<u>Reynoldsburg</u> Residence: City	<u>OH</u> State	<u>US</u> Country	<u>US</u> ✓ Citizenship
6479 Helm Court Mailing Address			
<u>Reynoldsburg</u> City	<u>Ohio</u> State	<u>43068</u> Zip	<u>US</u> Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
(Empty)		(Empty)	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
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